



RULE-MAKING ORDER

CR-103 (June 2004)
(Implements RCW 34.05.360)

Agency: Department of Health- Podiatric Medical Board.

☒ Permanent Rule
☐ Emergency Rule

Effective date of rule:

Permanent Rules

☒ 31 days after filing.
☐ Other (specify) (If less than 31 days after filing, a specific finding under RCW 34.05.380(3) is required and should be stated below)

Effective date of rule:

Emergency Rules

☐ Immediately upon filing.
☐ Later (specify)

Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?

☐ Yes ☒ No If Yes, explain:

Purpose: The rules set standards when prescribing and treating acute, chronic and intractable pain patients. By establishing rules under treatment of chronic pain may be reduced and access to care enhanced. The rules will alleviate the legal concerns and apprehensions of providers when managing pain patients with opioid therapy.

Citation of existing rules affected by this order:

Repealed: None
Amended: None
Suspended: None

Statutory authority for adoption: RCW 18.22.015; RCW 18.130.050

Other authority : Chapter 18.22 RCW; Chapter 18.130 RCW

PERMANENT RULE ONLY (Including Expedited Rule Making)

Adopted under notice filed as WSR 06-22-102 on 11/01/2006 (date).

Describe any changes other than editing from proposed to adopted version: WAC 246-922-520: A paragraph before subsection (1) was inadvertently left out of the proposed rule that clarifies that the guidelines referenced in subsections (1) through (4) are the September 13, 1996 "Guidelines for Management of Pain" that the Board approved. Correcting this omission clarifies the rule without changing its intended effect.

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

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EMERGENCY RULE ONLY

Under RCW 34.05.350 the agency for good cause finds:

- ☐ That immediate adoption, amendment, or repeal of a rule is necessary for the preservation of the public health, safety, or general welfare, and that observing the time requirements of notice and opportunity to comment upon adoption of a permanent rule would be contrary to the public interest.
- ☐ That state or federal law or federal rule or a federal deadline for state receipt of federal funds requires immediate adoption of a rule.

Reasons for this finding:

Date adopted:

5/11/07

NAME (TYPE OR PRINT)

David Bernstein, DPM

SIGNATURE

David Bernstein Executive Director, on behalf of

TITLE

Board Chair

CODE REVISER USE ONLY

CODE REVISER'S OFFICE
STATE OF WASHINGTON
FILED

MAY 11 2007

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(COMPLETE REVERSE SIDE)

**Note: If any category is left blank, it will be calculated as zero.
No descriptive text.**

**Count by whole WAC sections only, from the WAC number through the history note.
A section may be counted in more than one category.**

The number of sections adopted in order to comply with:

Federal statute:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Federal rules or standards:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Recently enacted state statutes:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>

The number of sections adopted at the request of a nongovernmental entity:

New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted in the agency's own initiative:

New	<u>4</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted in order to clarify, streamline, or reform agency procedures:

New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
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The number of sections adopted using:

Negotiated rule making:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Pilot rule making:	New	<u>0</u>	Amended	<u>0</u>	Repealed	<u>0</u>
Other alternative rule making:	New	<u>4</u>	Amended	<u>0</u>	Repealed	<u>0</u>

NEW SECTION

WAC 246-922-510 Use of controlled substances for pain control. (1) **Purpose.** The podiatric medical board recognizes that effective pain management is an essential component of quality medical care and that no single approach to the treatment of pain is exclusively correct.

(2) The board wishes to reassure podiatric physicians that they need not fear disciplinary action from the board for prescribing, dispensing, or administering controlled substances, including opioids, when treating pain so long as the care provided is consistent with currently acceptable podiatric medical practice. This includes acute, chronic, and intractable pain (RCW 69.50.308(g)) patients.

NEW SECTION

WAC 246-922-520 What specific guidance should a podiatric physician follow? The podiatric physician should consult the *Guidelines for Management of Pain* approved by the podiatric medical board effective September 13, 1996.

(1) The board has adopted guidelines for the management of pain in order to acquaint podiatric physicians with recognized national standards in the field of pain treatment.

(2) These guidelines specifically address the patient evaluation and treatment plan, informed consent, periodic reviews, use of consultations, and the necessity for maintaining accurate and complete medical records.

(3) These guidelines may be revised from time to time to reflect changes in the practice of pain management.

(4) Podiatric physicians who cannot, or choose not to, treat patients who have complex or chronic pain conditions should offer appropriate referrals for those patients.

NEW SECTION

WAC 246-922-530 What knowledge should a podiatric physician who elects to treat chronic pain patients possess? Podiatric physicians treating pain should be:

- (1) Knowledgeable about the complex nature of pain;
- (2) Familiar with the pain treatment terms used in the board's pain treatment guidelines; and
- (3) Knowledgeable about acceptable pain treatment modalities.

NEW SECTION

WAC 246-922-540 How will the board evaluate prescribing for pain? The podiatric physician's treatment will be evaluated by a review of the provided care to see if it is clinically sound and in accordance with currently acceptable podiatric medical practice regarding the treatment of pain.